

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Facility Information

Facility Name: OUR HOUSE LLC (510370)

Address: 902 SOUTH WASSON, RIVER FALLS, WI 54022

License Status: REGULAR

Licensed/Certified/Registered 10/01/1998

Regional Office: WESTERN REGION (EAU CLAIRE), (715) 836-4752

Survey History

Survey ID: 0096132 **End Date:** 11/11/2005 **Type:** OTHER **Purpose:** COMPLAINT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10009762 Served 01/09/2006

Deficiencies Cited
83.21(4)(p)

Subject Area
PROMPT AND ADEQUATE TREATMENT

Compliance
Verified

Corrected

Survey ID: 0094083 **End Date:** 02/02/2005 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0091823 **End Date:** 01/13/2004 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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CLASS CNA (NONAMBULATORY)

Complaint History

Date Complaint Received: 10/07/2005

Date Investigation Completed: 11/11/2005

Subject Area(s)

PROGRAM SERVICES

Result

SUBSTANTIATED

SOD #

10009762

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